



PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

Ellective December 29, 1999							\Box	<u> </u>	12	100	Δ
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMA TYI		ENTITY	OR	OTHER SMALL	
FC	R	NUMBE	R FILED	NUMBER 8	XTRA	RAT		FEE		RATE	FEE
ВА	SIC FEE		a a	1				345.00	OR		690.00
то	TAL CLAIMS	46	/ minus 2	0= . 2		X\$:	} =		OR	X\$18=	Ble G
INDEPENDENT CLAIMS . minus 3.= .						X39) =		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT						+13	0=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOT	AL		OR	TOTAL	10:50
CLAIMS AS AMENDED - PART II 6-17-03(Column 1) (Column 2) (Column 3)						SMA	LL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 39	Minus	40	=	X\$!)=	_	OR	X\$18=	
	Independent	• 2	Minus	··· S	<u> </u>	X39	=	-	OR	X78=	
	FIRST PRESE	NIATION OF MU	JETIPLE DEP	ENDENT CLAIM		+130)=		OR	+260=	
						TC ADDIT.	TAL		OR	TOTAL ADDIT, FEE	
(7-220	(Column 1)		(Column 2)	(Column 3)	AUUII.	rec			ADOM. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 39	Minus	40	= ,	X\$ 9)=		OR	X\$18=	
	Independent	· 2	Minus	PENDENT CLAIM	=	X39	II		OR	X78,=	
	FIRST PRESE	NIATION OF MO	JEHPLE DER	PENDENT CLAIM		+130)=		OR	+260=	
							TAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••	=	X\$ 9)= ·		OR	X\$18=	
ME	Independent	• .	Minus	***	=	X39	=		OR	X78=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1			.000	
	If the entry in coh-	+130			OR	+260=					
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** Total ADDIT. FEE ** Total Number Previously Paid For IN THIS SPACE is less than 3, enter "3." ** Total Canada Space In the Indiana Space In the Indiana Space In the Indiana In the appropriate box in column 1.											